

Testimony Supporting: S.B. 652: An Act Concerning Referrals from the Department of Children and Families to the Birth to Three Program

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Select Committee on Children
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Senator Looney and distinguished members of the Select Committee on Children:

I applaud your efforts to target intervention services to young children served by the Department of Children and Families (DCF). Children who experience abuse or neglect as infants and toddlers are at heightened risk for a range of developmental and mental health problems. By kindergarten, approximately 20% of maltreated children require special education services, compared to 7% of all children nationally.¹ In addition, while children in the custody of DCF comprise only about 1% of the State population, they make up approximately 65% of all patients admitted to our State child psychiatric inpatient units.²

The proposed legislation will allow for early identification and intervention with children at heightened risk for long-term impairing and costly educational, developmental, and mental health problems.

A recent study of a nationally representative sample of almost 1,000 infants and toddlers with substantiated reports of abuse or neglect suggests approximately one in four infants and toddlers served by DCF will be eligible for, and in need of birth to three intervention services.¹

I support the passing of Proposed Bill No. 652 to conduct a pilot project in two jurisdictions to refine referral procedures to optimize the identification and referral of those children in greatest need for early intervention.

I recommend that referral criteria be established and evaluated, and the proportion of children that are referred and determined to be eligible for services be carefully tracked. This will help to further refine referral procedures to optimize the appropriateness of referred cases to not overtax limited Birth to Three resources.

I also recommend that DCF efforts be coordinated with the Department of Public Health and its leadership and the task force members that were responsible for completing the September 2010 Statewide Needs Assessment for Maternal, Infant, and Early Childhood Programs.

References

1. Scarborough AA, Lloyd EC, Barth RP. Maltreated infants and toddlers: predictors of developmental delay. *J Dev Behav Pediatr*. Dec 2009;30(6):489-498.
2. Schaefer M. Public Sector Behavioral Health for Children and Families: Aligning Systems and Incentives. Zigler Center in Child Development and Social Policy Colloquium Series; November, 9, 2007., 2007; New Haven, CT.